
FIRE ALARM ACCEPTANCE TEST PROCEDURES





Introduction

This manual is designed to provide you, the contractor, owner or design professional with a step-by-step guide to our process, beginning with plan submission and ending with the final approval signature.

Additional copies of this publication may be obtained from:

City of Columbus
Department of Building and Zoning Services
757 Carolyn Avenue
Columbus, Ohio 43224

On-line at:
<http://bzs.columbus.gov/doclibrary.aspx?id=19406>



City of Columbus
Michael B. Coleman, Mayor

Department of Building and Zoning Services
Tracie Davies, Director

Chief Building Official
Keith E. Wagenknecht, AIA

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STEP 1: Fire Alarm Contractor Registration and Plan Submission

All fire alarm contractors must be licensed with the state of Ohio and registered with the City of Columbus Department of Building and Zoning Services (BZS). Instructions for registration and plan submittal for Fire Alarm Permits are available at the BZS Customer Service counter and on-line at:

<http://bzs.columbus.gov/doclibrary.aspx?id=19406>

Please see Appendixes 'A', 'B' and 'C':

- BZS Fire Alarm Permit Application with Instructions and Fee Schedule
- Columbus Fire Department Fire Alarm Permit Application
- CIC #24 - Fire Protection System Document Submittals



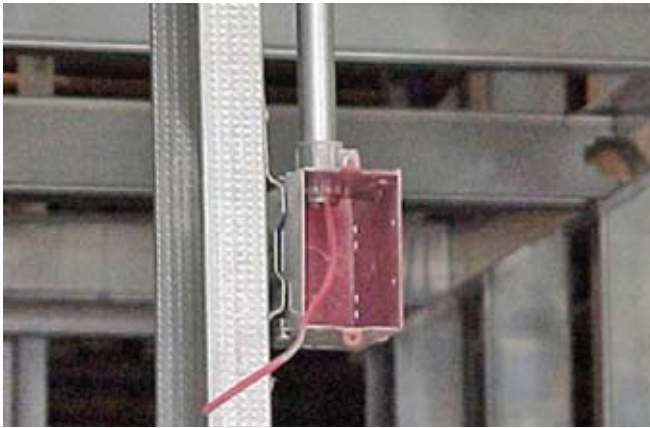
For non-Fire Division related questions call:

Fees and Licensing/Cashier	(614) 645-6090
Status and Processing	(614) 645-7562
Fire Suppression Plan Review	(614) 645-7943
Fire Alarm Plan Review	(614) 645-5699
Inspection:	
Fire Alarm	(614) 645-6371
Electrical	(614) 645-6076
HVAC	(614) 645-3270

For Fire Division related questions call:

Fire Prevention Bureau	(614) 645-7641
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STEP 2: System Installation Phase

As the fire alarm system is being installed, specific inspections must be performed.

The following information will outline these procedures.

Please see Appendix “D” – CIC #3: Lead Time For Joint Inspections.





- A. At the stage the contractor has installed the alarm device boxes and wiring in the rough walls (e.g. pull stations, horns, strobes, etc.) it will be necessary that these installations be inspected by the Electrical Inspector.

Inspection can be scheduled by calling the Electrical Inspection Line at 645-8265. The type of inspection is “Fire Alarm - Rough Walls”.

The items inspected will include but not be limited to:

- System components installed according to approved plans
- System components proper for this type of installation
- Device boxes in the proper location to meet all applicable codes and ADAAG guidelines

NOTE:

Inspector will indicate approval on the Building Permit under ‘Fire Alarm – Rough

Please see Appendix ‘F’:
Sample Building Permit





B. At the stage that the contractor has installed the alarm device boxes and wiring in the rough ceiling (e.g. smoke alarms, heat detectors, etc.) it will be necessary that these installations be inspected by the Electrical Inspector.

Inspection can be scheduled by calling the Electrical Inspection Line at (614) 645-8265. The type of inspection is “Fire Alarm-Rough Ceiling .”

The items inspected will include but not be limited to:

- System components installed according to approved plans?
- System components proper for this type of installation?

NOTE:

Inspector will indicate approval on the Building Permit under ‘Fire Alarm - Rough

Please see Appendix ‘F’:
Sample Building Permit





STEP 3: System Completion Phase

At this stage the installation contractor(s) are ready to perform a 100% pretest of all system components according to the guidelines set forth in NFPA 72.

As the test is performed, the NFPA 72 “Record of Completion” forms are to be filled out completely by the licensed installation contractor(s).

Please see Appendix ‘E’:
NFPA 72 Record of Completion Form





A return call will be made by Inspection Clerical Staff within two (2) working days upon the receipt of fax to confirm date, time, etc.

STEP 4: **Specialty Alarm Systems**

Specialty systems must be tested and approved prior to the final fire alarm witness test. To schedule inspection, fax Fire Protection Request Form with a completed NFPA 72 "Record of Completion" Form to Inspection, (614) 645-8358.

NOTE:

Please see Appendix 'D':
CIC#3: Lead Time For Joint Inspections –
Fire Alarm and Fire Suppression.

Building and Zoning Services personnel will notify the Columbus Division of Fire of the date and time of tests conducted. Contractors must notify the Columbus Division of Fire of all cancellations scheduled after normal business hours at (614) 645-7641.



A. Smoke Detector for Air Distribution Systems

To schedule inspection, fax Fire Protection Request Form (Please see Appendix 'G') to BZS Inspection, (614) 645-8358.

Inspectors needed:

1. HVAC
2. Fire Official

Testing procedures:

100% test of all device activation in accordance with the manufacturers specifications and all applicable code provisions.

The items inspected will include but not be limited to:

- Inspection of installation as per the approved plans, manufacturers specifications, and all applicable codes.
- Verification of unit shutdown upon activation or switch to smoke control mode of operation.
- Verification of system circuit trouble.

B. Smoke Dampers or Combination of Fire/Smoke Dampers

To schedule inspection, fax Fire Protection Request Form (Appendix 'G') to BZS Inspection, (614) 645-8358.

Inspectors needed:

1. HVAC
2. Fire Official

Testing procedures:

100% test of all device activation in accordance with the manufacturers specifications and all applicable code provisions.

The items inspected will include but not be limited to:

- Inspection of installation as per the approved plans, manufacturers specifications, and all applicable codes.
- Verification of unit operation upon activation of the system
- Verification of damper operation upon activation.



C. Fire Pumps

To schedule inspection fax Fire Protection Request Form to Inspection, (614) 645-8358.

Inspectors needed:

1. Electric
2. Fire Official

Testing procedures:

100% test of all device activation in accordance with the manufacturers specifications.

D. Smoke Control Systems

To schedule inspection fax Fire Protection Request Form with a completed Record of Completion Form to Inspection, (614) 645-8358.

Inspectors needed:

1. HVAC
2. Fire Official

Testing procedures:

100% test of all devices, equipment, components and sequences in accordance with the manufacturer's specifications and all applicable code provisions.





E. Dry Chemical, Wet Chemical, Clean Agent Systems and Carbon Dioxide Systems.

To schedule inspection fax Fire Protection Request Form with a completed Record of Completion Form to Inspection, (614) 645-8358.

Inspectors needed:

1. HVAC
2. Fire Official

Testing procedures:

100% test of all device activation in accordance with the manufacturers specifications and all applicable code provisions.

Items inspected will include, but not be limited to:

- Inspection of installation as per the approved plans, manufacturer's specifications and all applicable code provisions.



STEP 5: Final Fire Alarm Acceptance Test

The rough fire alarm approval and the testing and approval of all specialty systems must be completed prior to scheduling the Final Fire Alarm Acceptance Test. Failure to do so will result in a failed test and loss of the Building and Fire Department inspection fees.

To schedule the Final Fire Alarm Acceptance Test, fax the Fire Protection Request Form with a completed NFPA 72 “Record of Completion” Form to Inspection, (614) 645-8358.

NOTE:

Please see Appendix ‘D’:
CIC#3: Lead Time For Joint Inspections –
Fire Alarm and Fire Suppression.

A return call will be made by Inspection Clerical Staff within two (2) working days upon the receipt of fax to confirm date, time, etc.

Building and Zoning Services personnel will notify the Columbus Division of Fire of the date and time of tests conducted. Contractors must notify the Columbus Division of Fire of all cancellations scheduled after normal business hours at (614) 645-7641.

The Acceptance Test

The acceptance test will consist of a random inspection of device activation at a minimum of 10% of all devices (as determined by the inspector) except as otherwise noted on in

this manual. The inspection must include at least one device for each system component (i.e., elevator recall, smoke detector, horn-strobe, etc.)





Fire Alarm Acceptance Test Procedures

Manual Fire Alarm Systems

Inspectors needed:

1. Structural
2. Fire Official

Testing procedures:

Minimum 10% random test of all devices for circuit trouble and 100% for audibility.



Smoke Detection Systems

(excluding detectors for air distribution systems)

Inspectors needed:

1. Structural
2. Fire Official

Testing procedures:

Minimum 10% random test of all devices in accordance with the manufacturers' recommended testing method for alarm and circuit trouble.



Elevator Recall Activation

Inspectors needed:

1. Structural
2. Fire Official

Testing procedures:

The designated and alternate floor levels as well as the elevator machine room must be checked. The remainder of the test can be a random check of devices.



Fire Suppression Systems

(riser flow and tamper devices)

Inspectors needed:

1. Structural
2. Fire Official

Testing procedures:

100% test of riser/standpipe systems for flow alarm and tamper. Inspectors will verify the required residual pressure at system riser for all new systems. Post indicator valves and system circuit trouble shall be checked.



Special locking, egress control and electric strike devices

(i.e., hold-open devices, magnetic locks etc.)

Inspectors needed:

1. Structural
2. Fire Official

Testing procedures:

100% test of all device activation in accordance with the manufacturers specifications.



Emergency Egress Requirements

Inspectors needed:

1. Structural
2. Fire Official

Testing procedures:

100% test of all egress components including signage, lighting, and path of travel.



Fire Shutters / Rolling Fire Doors Activation

Inspectors needed:

1. Structural
2. Fire Official

Testing procedures:

100% test of all device activation in accordance with the manufacturers specifications.

Fire Alarm System Monitoring

(including sub and booster panels/
Automatic Telephone-dialing Devices)

Inspectors needed:

1. Structural
2. Fire Official

Testing procedures:

100% test of all device activation in accordance with the manufacturers specifications.



NFPA 72 "Record of Completion" forms are to be filled out by a licensed alarm contractor and placed at the fire alarm panel prior to the final inspection.



STEP 6: Final Approval

The Structural Inspector will complete a Fire Alarm Acceptance Test Form and will indicate approval on the Building Permit under “Fire Alarm – Final” (See Appendix Item ‘F’)

Appendix A—Fire Alarm Permit Application (page 1)

Applicant Name: _____ Job Site Address: _____ App. No.: _____



Fire Alarm Permit Application

City of Columbus, Ohio • Department of Development • Building Services Division
757 Carolyn Avenue, Columbus, Ohio 43224 • Phone: 614-645-7433 • Fax: 614-645-0082 • www.columbus.gov

ALL FEES ARE NON-REFUNDABLE • Please type or print all information

Date: _____

☐ Revision to Fire Alarm Permit #: _____ Bldg. Permit #: _____

Type of Permit:

Residential:

- ☐ 1 Family Dwelling
☐ 2 Family Dwelling
☐ 3 Family Dwelling

Commercial:

- ☐ 4 or more Family Dwelling;
of Units: _____
☐ Commercial Structure

Type of Work:

- ☐ Addition to Building ☐ Replace/ Repair Existing
☐ New Construction ☐ Alteration
☐ Removal Start-Fire Alarm Permit #: _____

Additional Inspections Requested w/ this Application: # _____

Building Use: _____

Scope of Work: _____

Job Site Information:

Certified Address _____ Zip _____ Working in Unit #/ Suite/ Flr. _____ Tenant's Name(s) _____

Tax District/ Parcel _____ Cost of Construction _____

Are there any active Building Services Division Violation Orders on this Property? ☐ Y ☐ N

Are there any active Neighborhood Services Division Violation Orders on this Property? ☐ Y ☐ N

Contractor:

State Company Number _____ Contractor Name _____ State Installer Number _____

Installer Name _____ Street Address _____ City, State, Zip _____

Telephone Number _____ Fax Number _____ Email Address _____

Signature of Certified Installer or Authorized Signer _____ Print or Type Name _____

PLEASE NOTE: Incomplete information will result in the rejection of this submittal.

For all questions regarding this form and fees please call: 614-645-6090

Please make checks payable the Columbus City Treasurer

Appendix A—Fire Alarm Permit Application (page 2)

Applicant Name: _____ Job Site Address: _____ App. No.: _____



Fire Alarm Permit Application

City of Columbus, Ohio • Department of Development • Building Services Division
757 Carolyn Avenue, Columbus, Ohio 43224 • Phone: 614-645-7433 • Fax: 614-645-0082 • www.columbus.gov

ALL FEES ARE NON-REFUNDABLE • Please type or print all information

Fire Alarm Devices	No. of Devices
Manual Pull Stations	
A/V Units	
Smoke/ Heat Detectors	
Elevator Recall	
Electric Strikes	
Egress Control Devices	
Hold Open Devices	
Fire Shutter	
Sprinkler Flow Alarm	
Sprinkler Tamper Devices	
Other:	
Total:	

Mechanical Devices	No. of Devices
Smoke Control System	
Duct Detectors	
Smoke Dampers	
Hood/Suppression Alarm	
Clean Agent/ Suppression Alarm	
Other:	
Total:	

Property Owner of Record:

Name _____ Street Address _____ City, State, Zip _____
Telephone Number _____ Fax Number _____ E-Mail Address _____

If Payment will be made through a SOFT Account, please provide the following:

SOFT Account #/ PIN # _____

SOFT Account Authorized Signature _____

The following Documents must be submitted with this Application:

- ☐ **Four** copies of complete fire alarm drawings that include:
- To-scale floor plans with room uses
 - Include a description of the system, sequence of operation, and cut-sheets of equipment
 - Drawings shall bear the seal or shop drawings approval of the Ohio Registered Architect/ Engineer responsible for design of the system, or Ohio Fire Alarm Designer Certification.
- ☐ **One** separate set of drawings as described above for the Columbus Division of Fire, Fire Prevention Bureau.
- ☐ Completed Division of Fire Alarm/ Suppression Permit Application

Fire Alarm Permit Fees for Building Services:

Fire Alarm, Detection, Suppression & Activation Devices:

Examination Fee for 1-9 devices: \$10
Examination Fee for 10 or more devices: \$200 + \$2.50 per additional device
Inspection Fee: \$300 (Includes 2 one hour inspections)
After Hours Inspection: \$450 (for first 2 hours); \$225 per hour over 2 hours

** Applicant has the option to buy additional inspections at the time of permit issuance for \$150 per inspection**

Fire Alarm Permit Fees for Columbus Division of Fire:

Automatic Fire Alarm Systems:

For 1-25 Devices: \$150.00
For 25+ Devices: \$175 + \$1.60 per additional device **over 25**

Manual Fire Alarm Systems:

For 1-10 Devices: \$150.00
For 11+ Devices: \$175 + \$1.50 per additional device **over 10**

NOTE: When a combination fire alarm system (includes both automatic & manual initiating devices) is being installed, the Manual Alarm System Fee will be applied.

** Retests of Failed Inspections: \$100 per Trip**

** One check can be presented with application for the combined Building Services and Division of Fire fees. **

PLEASE NOTE: Incomplete information will result in the rejection of this submittal.

For all questions regarding this form and fees please call: 614-645-6090

Please make checks payable the Columbus City Treasurer

Appendix B — Fire Department Alarm Permit Application

CITY OF COLUMBUS
Columbus Division of Fire
Fire Prevention Bureau
3639 Parsons Ave.
Columbus, OH 43207
614-645-8673
614-645-3004 FAX



FIRE ALARM / SUPPRESSION PERMIT APPLICATION

TYPE OR PRINT ALL INFORMATION

Fire Alarm / Suppression Permit #		Check #		Amount	
-----------------------------------	--	---------	--	--------	--

Job Title/Tenant's Name		Telephone	()
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ADDRESS OF JOB

Address				
City		State		Zip

CONTRACTOR

Contractor			Telephone	()
Contact Name			Fax	()
Address		City	State	Zip

PROPERTY OWNER OF RECORD (If known)

Address			Telephone	()
City		State	Zip	FAX ()

Indicate Number of Devices to be Installed or Altered:

DETECTORS (Smoke/Heat)	ALARMS (Audible/Visual)	MANUAL PULL STATIONS	Other (Flow Sw./Door Hlds/Etc.)	TOTAL DEVICES
Area Smoke Duct Smoke				

Indicate Number of Devices to be Installed or Altered:

Sprinkler Heads		Independent Suppress Systems (Wet or Dry Chemical, Carbon Dioxide, Etc.) Specify Type: _____ # of System _____
Limited Area Sprinkler Heads		
Standpipes		

- **PLEASE NOTE:** 1 inspection per plans review fee! Each sequential inspection will be at a cost of \$100.00
- **CANCELLATIONS:** You must notify the Fire Prevention Bureau Plans Review Section at 645-8673 prior to 8:00am (day of inspection) or a \$100.00 fee will be assessed.
- **SEE PLANS REVIEW FEE SCHEDULE FOR PRICING INFORMATION.**

If you have any questions regarding this form, please call (614) 645-8673. Incomplete information may result in rejection of submittal.

4/07

Appendix C — Fire Protection System Document Submittals (page 1)



City of Columbus
Mayor Michael B. Coleman

Department of Development

Boyce Safford III, Director

Building Services Division

757 Carolyn Avenue
Columbus, Ohio 43224-3218
(614) 645-6090 (614) 645-7840 FAX
www.columbusonestopshop.com

July 1, 2009

(Revised 9/17/09)

Construction Industry Communication #24

From: Keith Wagenknecht, Chief Building Official

RE: Fire Protection System Document Submittals

Requirements: Section 105.3.1.4 of the 2007 Ohio building Code requires Fire Protection System Construction Documents be submitted under the signature of an individual certified under Section 378.105 of the Ohio Revised Code or bear the seal and signature of the design professional who prepared the construction documents.

Evidence of Responsibility: In accordance with Section 106.3.4 of the 2007 Ohio Building Code, Documents shall indicate the **sole person responsible** for the design and preparation of the construction documents. Documents submitted will no longer be acceptable by submitting drawings from the design professional and the remainder of the documents from the certified fire alarm designer.

Memorandum: Beginning August 1, 2009 Fire Alarm and Fire Suppression System Construction documents must be submitted with either the signature of the certified fire alarm designer or documents sealed and signed by the design professional. City of Columbus will no longer accept documents that have been reproduced from the design professional without their knowledge and authorization.

Construction documents required by Section 907.2 to be submitted include:

- ☐ Locations of alarm-initiating and notification appliances
- ☐ Alarm control and trouble signaling equipment
- ☐ Power connection
- ☐ Supervisory system connection
- ☐ Battery calculations
- ☐ Conductor type and sizes
- ☐ Voltage drop calculations
- ☐ Manufacturers, model numbers and listing information for equipment, devices and materials (catalog cuts)
- ☐ Details of ceiling height and construction
- ☐ Interface of fire safety control functions (sequence of operation)
- ☐ Symbols legend

Appendix C — Fire Protection System Document Submittals (page 2)

Licensed Fire Alarm contractors wishing to obtain rough inspections for their work prior to completion and submittal of required fire alarm shop drawings, catalog cuts, battery calculations etc., may submit design drawings prepared by a licensed design professional, showing the location of all fire alarm devices. Drawings and a fire alarm permit application must follow normal submittal process, meaning four (4) sets of the proposed work shall be submitted to Building Services, plus one (1) set and application for the Fire Prevention review. All customary fees are required to be paid up front. After plan review and approval, by both departments, has been obtained, the fire alarm permit will be issued and a rough inspection(s) for the work may be requested.

The fire alarm contractor shall submit completed documents for review and approval as required above. This submittal is a revision to the approved documents and the applicant shall pay the fee for revision in accordance with the fee schedule. Final approval of the fire alarm installation shall be based on the approved revised drawings including any changes required for full compliance for the fire alarm system as maybe noted or shown on the revised drawings.

mfinks/comm.edu.train/CIC #24
REVISED 9/17/09

Appendix D — CIC #3 Inspection Time (page 1)



City of Columbus
Mayor Michael B. Coleman

Department of Development

Building Services Division

757 Carolyn Avenue
Columbus, Ohio 43224-3218
(614) 645-7433 (614) 645-7840 FAX

February 2008

(Revised: July 2009)

Construction Industry Communication # 03

From: Keith Wagenknecht, Chief Building Official

Re: LEAD TIME FOR JOINT INSPECTIONS – FIRE ALARM AND FIRE SUPPRESSION

Requirements: Ohio Building Code Section 109.5 **Inspection Requests:** It shall be the duty of the owner's duly authorized agent to notify the building official when work is ready for inspection. Access to and means for inspection of such work shall be provided for any inspections that are required by this code.

Background: In an effort to minimize delays on the part of the contracting industry and possible removal of newly installed wall board, personnel from the Fire Prevention Bureau and the Building Services Division have held a series of meetings to coordinate the scheduling of their respective inspections. Acknowledging the fact that both the fire alarm and fire suppression systems must be inspected by both groups, a joint inspection with both parties present is the most efficient way to perform said inspections. Because the demand for these inspections is high and current personnel resources are limited, it becomes necessary to schedule these inspections with some lead-time involved. For this reason, the following policy has been put into effect.

Memorandum: Lead-time will allow both Fire and Building to check on the availability of inspectors, so that both inspectors can perform the inspection the same day. The following schedule will be used in scheduling inspections:

TYPE OF INSPECTION	ROUGH	FINAL	LEAD TIME DAY(S)*	INSPECTION REQUIRED
Fire Alarm	X		4 PM DAY BEFORE	Electric
Fire Alarm Witness		X	10 AM, 2 Days	Structural / Fire
F S Hydrostatic 200 psi 2 hrs		X	10 AM, 2 Days	Structural / Fire
F S Hydrostatic Working Pressure		X	10 AM, 2 Days	Structural / Fire
F S Hydrostatic air @ 40 psi 24 hrs		X	10 AM, 2 Days	Structural / Fire @ start / Fire @ end
Fire Suppression	X		10 AM, 2 Days	Structural / Fire
Fire Suppression		X	4 PM DAY BEFORE	Structural
Fire Suppression - Limited Area	X	X	4 PM DAY BEFORE	Structural
Smoke Control System	X		4 PM DAY BEFORE	HVAC
Smoke Control System Witness		X	10 AM, 2 Days	HVAC / Fire
Smoke Duct Detectors	X		4 PM DAY BEFORE	HVAC
Smoke Duct Detectors Witness		X	10 AM, 2 Days	HVAC / Fire
Smoke Dampers	X		4 PM DAY BEFORE	HVAC
Smoke Dampers Witness		X	10 AM, 2 Days	HVAC / Fire
Wet Chemical Suppression	X		4 PM DAY BEFORE	HVAC

Appendix D — CIC #3 Inspection Time (page 2)

Wet Chemical Suppression Witness		X	10 AM, 2 Days	HVAC / Fire
Clean Agent Suppression	X		4 PM DAY BEFORE	HVAC
Clean Agent Suppression Witness		X	10 AM, 2 Days	HVAC / Fire
Dry Chemical, Foam, Carbon Dioxide Systems	X		4 PM DAY BEFORE	HVAC
Dry Chemical, Foam, Carbon Dioxide Systems Witness		X	10 AM, 2 Days	HVAC / Fire
Fire Alarm Witness for Mechanical Systems		X	10 AM, 2 Days	HVAC / Fire
Emergency Generator	X	X	4 PM, 2-3 DAYS	Electric (Time test)
Fire Pump		X	10 AM, 2 Days	Fire / Electric

* Please be advised that due to scheduling and the availability of city inspectors, additional time maybe required to schedule your inspection. If your inspection is critical, please submit your request for inspection at least three (3) days prior to the date needed.

Appendix E — NFPA Record of Completion (page 1)

FIRE ALARM SYSTEM RECORD OF COMPLETION

To be completed by the system installation contractor at the time of system acceptance and approval.

1. PROTECTED PROPERTY INFORMATION

Name of property: _____

Address: _____

Description of property: _____

Occupancy type: _____

Name of property representative: _____

Address: _____

Phone: _____ Fax: _____ E-mail: _____

Authority having jurisdiction over this property: _____

Phone: _____ Fax: _____ E-mail: _____

2. FIRE ALARM SYSTEM INSTALLATION, SERVICE, AND TESTING INFORMATION

Installation contractor for this equipment: _____

Address: _____

Phone: _____ Fax: _____ E-mail: _____

Service organization for this equipment: _____

Address: _____

Phone: _____ Fax: _____ E-mail: _____

Location of as-built drawings: _____ Location of historical test reports: _____

Location of system operation and maintenance manuals: _____

A contract for test and inspection in accordance with NFPA standards is in effect as of _____

Contracted testing company: _____

Address: _____

Phone: _____ Fax: _____ E-mail: _____

Contract expires: _____ Contract number: _____ Frequency of routine inspections: _____

3. TYPE OF FIRE ALARM SYSTEM OR SERVICE

NFPA 72 Chapter Reference of System Type: _____

Name of organization receiving alarm signals with phone numbers (if applicable):

Alarm: _____ Phone: _____

Supervisory: _____ Phone: _____

Trouble: _____ Phone: _____

Entity to which alarms are retransmitted: _____ Phone: _____

Method of retransmission of alarms to that organization or location: _____

Appendix E — NFPA Record of Completion (page 2)

3. TYPE OF FIRE ALARM SYSTEM OR SERVICE *(continued)*

If Chapter 8, note the means of transmission from the protected premises to the central station:

☐ Digital alarm communicator ☐ McCulloh ☐ Multiplex ☐ 2-way radio ☐ 1-way radio ☐ N/A

If Chapter 9, note the type of connection: ☐ Local energy ☐ Shunt ☐ N/A

3.1 System Software

Operating system (executive) software revision level: _____

Site-specific software revision date: _____ Revision completed by: _____

4. SIGNALING LINE CIRCUITS

Characteristics of signaling line circuits connected to this system (see NFPA 72, Table 6.6.1):

Quantity: _____ Style: _____ Class: _____

5. ALARM-INITIATING DEVICES AND CIRCUITS

Characteristics of initiating device circuits connected to this system (see NFPA 72, Table 6.5):

Quantity: _____ Style: _____ Class: _____

5.1 Manual Initiating Devices

5.1.1 Manual Pull Stations

Number of manual pull stations: _____

Type of devices: ☐ Addressable ☐ Conventional ☐ Coded ☐ Transmitter ☐ N/A

5.2 Automatic Initiating Devices

5.2.1 Area Smoke Detectors

Number of smoke detectors: _____

Type of coverage: ☐ Complete area ☐ Partial area ☐ Nonrequired partial area ☐ N/A

Type of devices: ☐ Addressable ☐ Conventional ☐ Coded ☐ Transmitter ☐ N/A

Type of smoke detector sensing technology: ☐ Ionization ☐ Photoelectric

5.2.2 Duct Smoke Detectors

Number of duct smoke detectors: _____

Type of coverage: _____

Type of devices: ☐ Addressable ☐ Conventional ☐ Coded ☐ Transmitter ☐ N/A

Type of smoke detector sensing technology: ☐ Ionization ☐ Photoelectric

5.2.3 Heat Detectors

Number of heat detectors: _____

Type of coverage: ☐ Complete area ☐ Partial area ☐ Nonrequired partial area ☐ N/A

Type of devices: ☐ Addressable ☐ Conventional ☐ Coded ☐ Transmitter ☐ N/A

5.2.4 Sprinkler Waterflow Detectors

Number of waterflow detectors: _____

Type of devices ☐ Addressable ☐ Conventional ☐ Coded ☐ Transmitter ☐ N/A

5.2.5 Alarm Verification

Number of devices subject to alarm verification: _____

Alarm verification on this system is: ☐ Enabled ☐ Disabled ☐ Set for _____ seconds

Appendix E — NFPA Record of Completion (page 3)

6. SUPERVISORY SIGNAL-INITIATING DEVICES AND CIRCUITS

6.1 Sprinkler System

Number of valve supervisory switches: _____

Type of devices: ☐ Addressable ☐ Conventional ☐ Coded ☐ Transmitter ☐ N/A

6.2 Fire Pump

Type of fire pump: ☐ Electric ☐ Diesel

Type of fire pump supervisory devices: ☐ Addressable ☐ Conventional ☐ Coded ☐ Transmitter ☐ N/A

Fire Pump Functions Supervised

☐ Fire pump power ☐ Fire pump running ☐ Fire pump phase reversal ☐ Selector switch not in auto

☐ Engine or control panel trouble ☐ Low fuel

Other: _____

6.3 Engine-Driven Generator

Type of generator supervisory devices: ☐ Addressable ☐ Conventional ☐ Coded ☐ Transmitter ☐ N/A

☐ Engine or control panel trouble ☐ Generator running ☐ Selector switch not in auto ☐ Low fuel

Other: _____

7. ANNUNCIATORS

7.1 Annunciator 1 ☐ Local ☐ Remote

Type: ☐ Addressable ☐ Directory ☐ Graphic ☐ N/A Location: _____

7.2 Annunciator 2 ☐ Local ☐ Remote

Type: ☐ Addressable ☐ Directory ☐ Graphic ☐ N/A Location: _____

7.3 Annunciator 3 ☐ Local ☐ Remote

Type: ☐ Addressable ☐ Directory ☐ Graphic ☐ N/A Location: _____

8. ALARM NOTIFICATION DEVICES AND CIRCUITS

8.1 Emergency Voice Alarm Service

Number of single voice alarm channels: _____ Number of multiple voice alarm channels: _____

Number of speakers: _____ Number of speaker zones: _____

8.2 Telephone Jacks

Number of telephone jacks installed: _____ Number of telephone handsets stored on site: _____

Type of telephone system installed: ☐ Electrically powered ☐ Sound powered ☐ N/A

8.3 Nonvoice Audible System

Characteristics of notification device circuits connected to this system (see NFPA 72, Table 6.5):

Quantity: _____ Style: _____ Class: _____

Appendix E — NFPA Record of Completion (page 4)

8. ALARM NOTIFICATION DEVICES AND CIRCUITS *(continued)*

8.4 Types and Quantities of Nonvoice Notification Appliances Installed

Bells: _____ With visual device: _____ Horns: _____ With visual device: _____
Chimes: _____ With visual device: _____ Bells: _____ With visual device: _____
Visual devices without audible devices: _____ Other (describe): _____

9. EMERGENCY CONTROL FUNCTIONS ACTIVATED

- ☐ Hold-open door releasing devices ☐ Smoke management or smoke control
☐ Door unlocking ☐ Elevator recall ☐ Other

10. SYSTEM POWER SUPPLY

10.1 Primary Power

Nominal voltage _____ Amps _____
Overcurrent protection: Type _____ Amps _____
Location (of primary supply panelboard): _____
Disconnecting means location: _____

10.2 Secondary Power

Location: _____ Type: _____ Nominal voltage: _____ Current rating: _____
Number of standby batteries: _____ Amp hour rating: _____
Location of emergency generator: _____
Location of fuel storage: _____
Calculated capacity of secondary power to drive the system _____
In standby mode: _____ In alarm mode: _____

11. RECORD OF SYSTEM INSTALLATION

Fill out after all installation is complete and wiring has been checked for opens, shorts, ground faults, and improper branching, but before conducting operational acceptance tests.

The system has been installed in accordance with the following NFPA standards: (Note any or all that apply.)

- ☐ NFPA 72 ☐ NFPA 70, *National Electrical Code*, Article 760
☐ Manufacturer's published instructions ☐ Other (please specify): _____

System deviations from referenced NFPA standards: _____

Signed: _____ Printed name: _____ Date: _____

Organization: _____ Title: _____ Phone: _____

12. RECORD OF SYSTEM OPERATION

All operational features and functions of this system were tested by or in the presence of the signer shown below, on the date shown below, and were found to be operating properly in accordance with the requirements of:

- ☐ NFPA 72 ☐ NFPA 70, *National Electrical Code*, Article 760
☐ Manufacturer's published instructions ☐ Other (please specify): _____
☐ Documentation in accordance with Inspection and Testing Form (Figure 10.6.2.3) is attached

Signed: _____ Printed name: _____ Date: _____

Organization: _____ Title: _____ Phone: _____

Appendix E — NFPA Record of Completion (page 5)

13. CERTIFICATIONS AND APPROVALS

13.1 System Installation Contractor

This system as specified herein has been installed and tested according to all NFPA standards cited herein.

Signed: _____ Printed name: _____ Date: _____

Organization: _____ Title: _____ Phone: _____

13.2 System Service Contractor

This system as specified herein has been installed and tested according to all NFPA standards cited herein.

Signed: _____ Printed name: _____ Date: _____

Organization: _____ Title: _____ Phone: _____

13.3 Central Station

This system as specified herein will be monitored according to all NFPA standards cited herein.

Signed: _____ Printed name: _____ Date: _____

Organization: _____ Title: _____ Phone: _____

13.4 Property Representative

I accept this system as having been installed and tested to its specifications and all NFPA standards cited herein.

Signed: _____ Printed name: _____ Date: _____

Organization: _____ Title: _____ Phone: _____


13.5 Authority Having Jurisdiction

I have witnessed a satisfactory acceptance test of this system and find it to be installed and operating properly in accordance with its approved plans and specifications, its approved sequence of operations, and with all NFPA standards cited herein.

Signed: _____ Printed name: _____ Date: _____

Organization: _____ Title: _____ Phone: _____

Appendix F — Sample Building Permit

	<p>City of Columbus Department Development Building Services BUILDING PERMIT 757 Carolyn Avenue, Columbus, OHIO 43224 To Cancel Inspection call 645-7847</p>	<p>Building Commercial New Construction Structural</p>																																																																																																				
<p>Issue Date: 1/21/2010 Status: Issued Mayor Michael B. Coleman</p>	<p>***THIS PERMIT EXPIRES IN ACCORDANCE WITH THE APPLICABLE SECTION OF CCC TITLE 41 FOR WHICH IT WAS ISSUED***</p>																																																																																																					
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">CONTRACTOR INFORMATION</div> <div style="width: 45%;">OWNER OF RECORD</div> </div>																																																																																																						
<p>***IT SHALL BE UNLAWFUL TO REMOVE THIS PERMIT FROM THE JOB SITE*** <small>The acquisition of this permit does not necessarily mean that other permits which are required have been obtained</small></p>																																																																																																						
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Appendix G — Fire Protection Inspection Form



City of Columbus

Development Department

Building Services Division

FIRE PROTECTION INSPECTION REQUEST FORM

JOB SITE ADDRESS

DATE REQUESTED

CONFIRMED DATE / TIME

☐ FIRE ALARM WITNESS TEST

☐ FIRE SUPPRESSION HYDROSTATIC TEST

☐ HVAC SYSTEM TEST

☐ Regular Business Hours

☐ ELECTRICAL SYSTEM TEST

☐ After Regular Business Hours

☐ ROUGH SUPPRESSION

☐ FINAL SUPPRESSION

SOFT ACCOUNT #

PIN #

AUTHORIZED SIGNATURE OF ACCOUNT

PERMIT NUMBER

FIRE ALARM #

FIRE SUPPRESSION #

CONTRACTOR INFORMATION

CONTACT PERSON

CONTACT PHONE NUMBER

#	Fire Alarm Devices	#	Fire Alarm Devices	#	HVAC Devices	#	Electrical Systems
	Manual Pull Stations		Egress Control Devices		Smoke Control System		Generator test
	A/V Units		Hold Open Devices		Duct Detectors		Fire Pump Test
	Smoke/Heat Detectors		Fire Shutter		Smoke Dampers		Fire Suppression Systems
	Elevator Recall		Sprinkler Flow Alarm		Hood/Suppression Alarm		
	Electric Strikes		Sprinkler Tamper Device		FM 200		
	Other:		Other:		Stairway Pressurization		
					Other:		Risers

Comments:

FIRE PROTECTION COMPANY NAME					
F/A INSTALLER SIGNATURE		DATE		FIRE PROTECTION LICENSE #	
F/S INSTALLER SIGNATURE		DATE		FIRE SUPPRESSION LICENSE #	

FP INSPECTION REQUEST FORM
3/25/2008
DG



C. Fire Dampers

Inspection can be scheduled by calling the HVAC inspection line at (614) 645-8138. This type of inspection is called a “Damper Test”.

Inspectors needed:

1. HVAC
2. Fire Official

Testing procedures:

100% test of all device activation in accordance with the manufacturers specifications.

The items inspected will include but not be limited to:

- Inspection of installation as per the approved plans, manufacturers specifications, and all applicable codes.
- Verification of unit shutdown upon activation of the system.

D. Stairway Pressurization

To schedule inspection fax Fire Protection Request Form with a completed Record of Completion form to Inspection, (614) 645-8358.

Inspectors needed:

1. HVAC
2. Fire Official

Testing procedures:

100% test of all devices in accordance with the manufacturers specifications and the City of Columbus Building Code.

NOTE:

Inspector will indicate approval on the Building Permit under ‘Fire Alarm - Rough (see Appendix ‘E’)